

Peak Development for ... Home Health Aides[©]

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PEAK DEVELOPMENT RESOURCES W

Maintaining Boundaries in Home Care

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After reading the newsletter, the home health aide should be able to:

- 1. Define boundaries, as they relate to the healthcare provider.
- 2. Discuss the importance of boundaries in the HHA-client relationship.
- 3. List three clues that a boundary violation may be occurring.
- 4. State four actions that help to prevent the occurrence of boundary violations.

Rhonda is the home health aide caring for Mrs. Plant, who has cancer. One day, Mrs. Plant says to Rhonda, "My husband is taking me out of town next week for another treatment. I need to find someone to care for my dog twice a day while I'm

gone. I pay very well—do you know of anyone?"

Rhonda thought to herself, "I sure could use the extra money, and I could come over before and after work each day." But something didn't seem quite right to her. "I'm not sure I should be doing personal things for my clients", Rhonda thought — "It makes me uncomfortable." Rhonda listened to her instincts, and helped Mrs. Plant find a pet-sitter in the phone book.

As it turned out, Rhonda's instincts were good ones. Healthcare providers must be aware of and maintain professional boundaries at all times. This newsletter will define and clarify the issue of boundaries, as well as provide guidelines for recognizing and preventing boundary violations.

Boundaries in Healthcare

As a home health aide, you have an obligation to act in a professional and ethical way when caring for your clients. This means that you follow certain standards of behavior, such as maintaining confidentiality, providing the care that you are assigned to provide, and maintaining appropriate boundaries with your clients.

Your relationship with your clients

is a professional one. You are there to help meet specific client needs. Boundaries are the limits that define this professional relationship. If this relationship goes outside of these boundaries to become personal, social, or business in nature, then a boundary violation has occurred.

Boundaries are there for the protection of the client. Clients receive health care because they have needs, and are dependent on your care. You have the power to meet these needs. Any time that one person has power over another, there is the danger of misuse of that power. Boundaries protect the client from inappropriate use of the healthcare provider's power.

Of course, most healthcare providers do not knowingly misuse their power, but boundary violation can be very subtle. The focus of healthcare is on meeting the client's needs. A hallmark of the boundary violation, however, is that it meets the needs of the healthcare provider instead of the client.

It can be difficult to know exactly where these boundary lines are drawn. There is a fine line between a warm, caring, professional relationship and one that is becoming personal. To further complicate matters, the same action by the home health aide may be appropriate in one situation and inappropriate in another. For example,

a hug between the client and home health aide can be completely appropriate, such as



when an elderly client is finally able to walk again. Or, it can signal an inappropriate relationship, such as hugging a client to whom the home health aide is attracted.

Boundary violations come in many different forms. They may be personal, such as the client and home health aide having feelings of attraction for each other. They may be business-related, such as the home health aide using her clients to promote her husband's painting business. Or, they may be social—for example, when the home health aide attends parties given by the client's family.

Watch for These Clues

There are many signs that indicate a boundary violation is occurring, or is about to occur. One of the first signs is often an increase in self-disclosure... the home health aide talks to the client about his or her own personal life. Carla, the home health aide, may have found 72-year old Mrs. Harper to be the ideal "ear" to listen to all of Carla's problems... but whose needs are being met? Carla's are, and that constitutes a boundary violation.

Be aware of your feelings about your clients. We all have clients that we are especially fond of or attached to. But if you find yourself trying to rearrange assignments to be with a particular client, or you feel that no one understands this client like you do, those are definite danger signs of boundary violation. Likewise, if you feel the desire to "check in on" a client by calling or visiting during non-work hours, take this as a sign that you are over-involved.

Any time you find yourself wondering, "Am I crossing the line with this client?", take that concern seriously. Ask yourself, "Am I getting a personal benefit out of this relationship?" If the answer is yes,

you have crossed the line. Another clue to boundary violation is secrecy. If there are things about this relationship that you would not want to document in the record or discuss in a staff meeting, boundary

violation is likely.

Others are most likely to notice our behavior first, before we are even aware of it. If your co-workers or supervisor feel that your relationship with a client has exceeded normal boundaries, listen to them... they are probably right. When confronted with this concern, a common reaction of the healthcare provider who has committed a boundary violation is, "Oh, they're just jealous that I have such a good relationship with my client."

Maintaining Appropriate Boundaries

The home setting can make it more difficult to recognize and maintain appropriate boundaries, especially when the caregiver and client interact over a long period of time. The client is in his or her area of comfort, and the relationship may feel more informal than in a hospital or long-term care setting.

You, as the healthcare provider, are responsible for maintaining appropriate boundaries with your clients. For many reasons, such as fear, loneliness or to make sure they get "good" care, some clients may try to exceed these boundaries. They may give you gifts, try to establish a more "personal" relationship with you, or flatter you by saying things like, "No one can take care of me as well as you can." Beware of these behaviors, and respond appropriately. Always follow your agency's policy on accepting gifts from clients. Don't be afraid to say, "I really appreciate your kindness, but we're not allowed to accept gifts."

Stay alert, to protect yourself and your clients from boundary violation. Keep your relationships on a professional level by focusing on the immediate needs and care of the client. Do not engage in discussions about your personal life. Often a quick change of subject is all that is needed if a client asks personal questions... "Well, let's see how you're walking today, Mrs. Bailey." If the client persists, a simple statement such as, "I really can't discuss my personal life" should suffice. Use professional language when communicating with your client, and avoid jokes or actions of a sexual nature, such as flirting.

Keep your contacts with the client work-related. Perform the work you are assigned to perform, and let your supervisor know if the client has additional needs that are not being met. Don't call or visit clients during your off-time, or accept their phone calls at home.

If you find you cannot work effectively with the client, either because of your feelings or the client's, request a change of assignment. Remember that boundary violations can have serious consequences for both you and the client. The client who has been a victim of boundary violation may feel used, angry,

embarrassed or depressed. For the healthcare provider, depending on state laws, it can result in loss of job, loss of licensure, and civil or criminal legal action.

You and your client both benefit when you maintain appropriate boundaries. Your client feels secure in the care you provide, and can benefit from that care. And you have the satisfaction that comes from a job well done!



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NAME:	DATE:
Directio	ons: Place the letter of the one best answer in the space provided.
1.	When referring to the relationship between the client and home health aide (HHA), boundaries are: A. actions that are not appropriate in client care B. whatever the client feels is appropriate C. whatever the HHA feels is appropriate D. the limits that define a professional relationship
<u>, 2</u> .	Boundaries are essential to protect clients from the HHA's: A. power B. anger C. poor care D. lack of knowledge
3.	Which of the following is the clearest indication that a boundary violation has occurred? A. the client is not satisfied with his or her care B. the HHA hugs a client C. the HHA asks for a change of assignment D. the needs of the HHA are being met
4.	Which of the following is the best example of a business-related boundary violation? The HHA: A. shares personal information with the client B. asks the client if she would like to buy Tupperware C. is attracted to the client D. attends a party given by the client
5.	Betty, the HHA, regularly talks about her problems with Mr. Clark, her client Mr. Clark is happy to listen and enjoys talking with Betty. Since this relationship is not hurting either person, it is not a boundary violation. A. True R. False

6.	The first person to realize that a boundary violation is occurring is usually: A. the client B. the HHA who is committing the violation C. a co-worker or supervisor D. none of the above
7.	If there are things about the HHA-client relationship that the HHA would not want to document in the record, then a boundary violation is likely. A. True B. False
8.	Bill and his client, Sarah C., are attracted to each other. Their personal relationship began when Sarah told Bill of her feelings for him. Because Sarah wants this relationship, it is acceptable for Bill to allow it to develop. A. True B. False
9.	Paula is the HHA caring for Mr. Peters, an elderly man living on a small income. Paula notices that there is very little food in the house, and Mr. Peters says he is often hungry. Paula's best response is to: A. bring him a few groceries after work B. call Mr. Peters' daughter to let her know that her father needs groceries C. notify the nurse at the agency D. review Mr. Peters' budget to see if more could be spent on groceries
10	Julie is a HHA who also works as a beauty consultant in the evenings. When she arrives at Mrs. Cooper's house for her assignment, Mrs. Cooper sees the company sticker on Julie's car and says, "Oh, I love those products, and I need some more." Julie's best action is to: A. sell Mrs. Cooper the products she needs B. explain that she cannot sell products to Mrs. Cooper, but she can sell to Mrs. Cooper's friends and relatives C. request a change of assignment D. suggest that Mrs. Cooper call the company if she'd like to place an order